



STATE OF MARYLAND

DMMH

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April 24, 2009

Public Health & Emergency Preparedness Bulletin: # 2009:15 Reporting for the week ending 04/18/09 (MMWR Week #15)

CURRENT HOMELAND SECURITY THREAT LEVELS

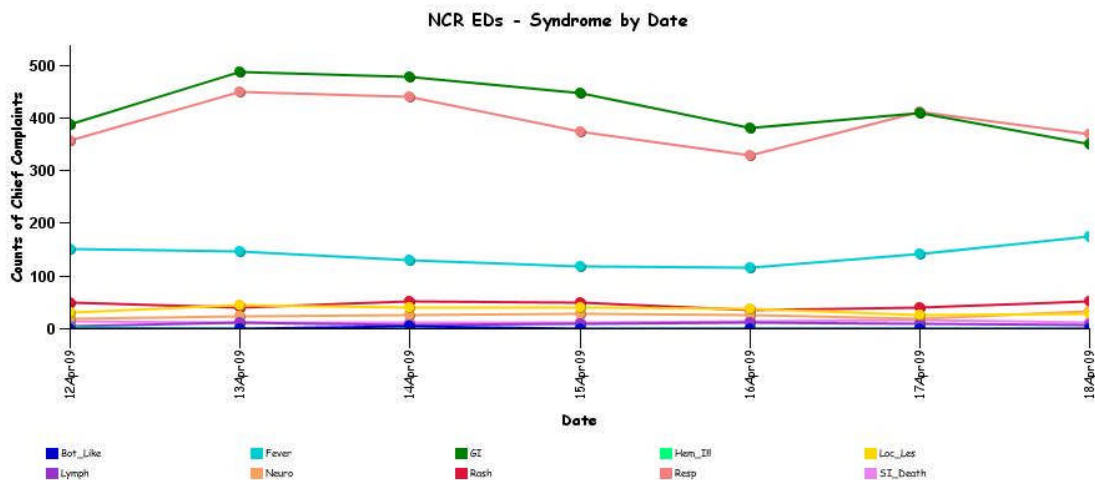
National: Yellow (ELEVATED) *The threat level in the airline sector is Orange (HIGH)
Maryland: Yellow (ELEVATED)

SYNDROMIC SURVEILLANCE REPORTS

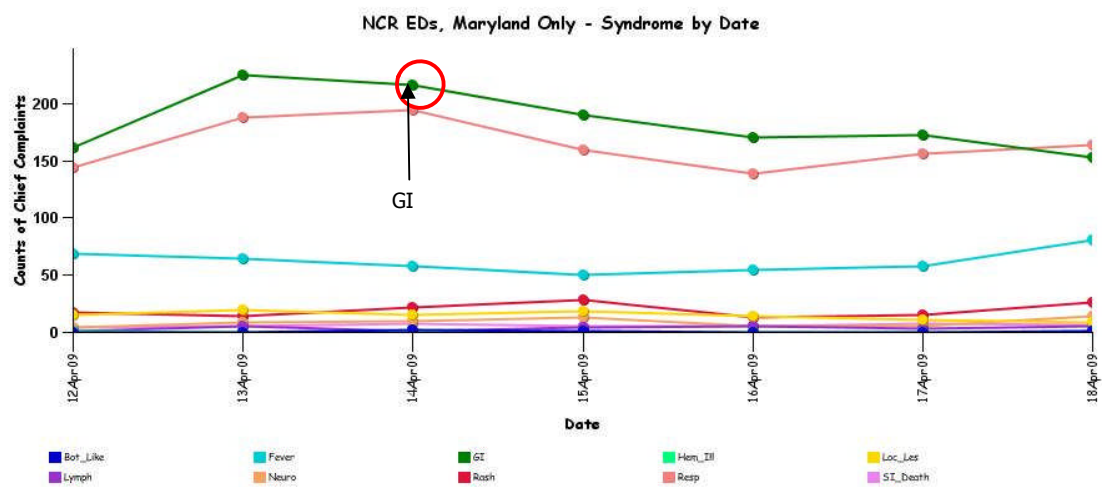
ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics):

Graphical representation is provided for all syndromes, excluding the "Other" category, all age groups, and red alerts are circled. Note: ESSENCE – ANCR Spring 2006 (v 1.3) now uses syndrome categories consistent with CDC definitions.

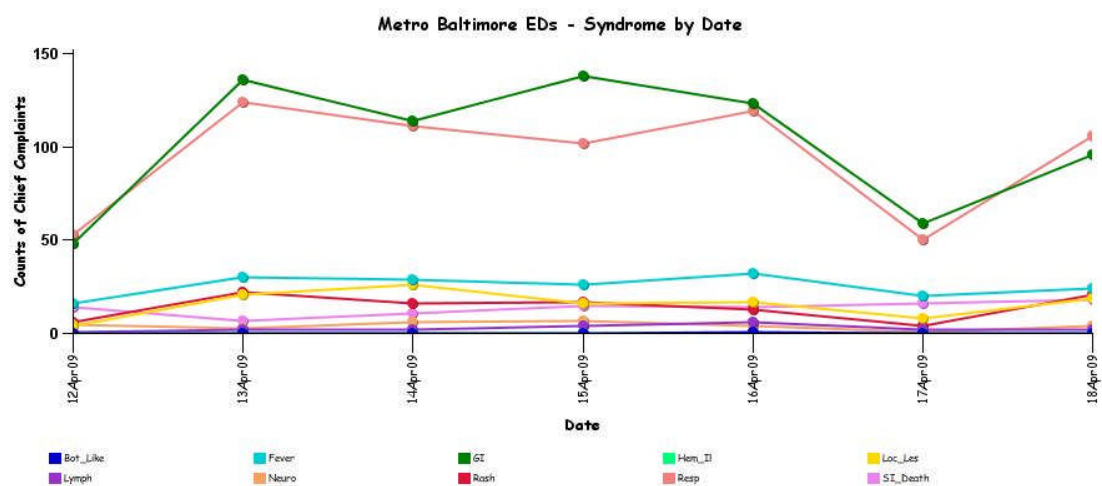
Overall, no suspicious patterns of illness were identified. Track backs to the health care facilities yielded no suspicious patterns of illness.



* Includes EDs in all jurisdictions in the NCR (MD, VA, DC) under surveillance in the ESSENCE system.



* Includes only Maryland EDs in the NCR (Prince George's and Montgomery Counties) under surveillance in the ESSENCE system.

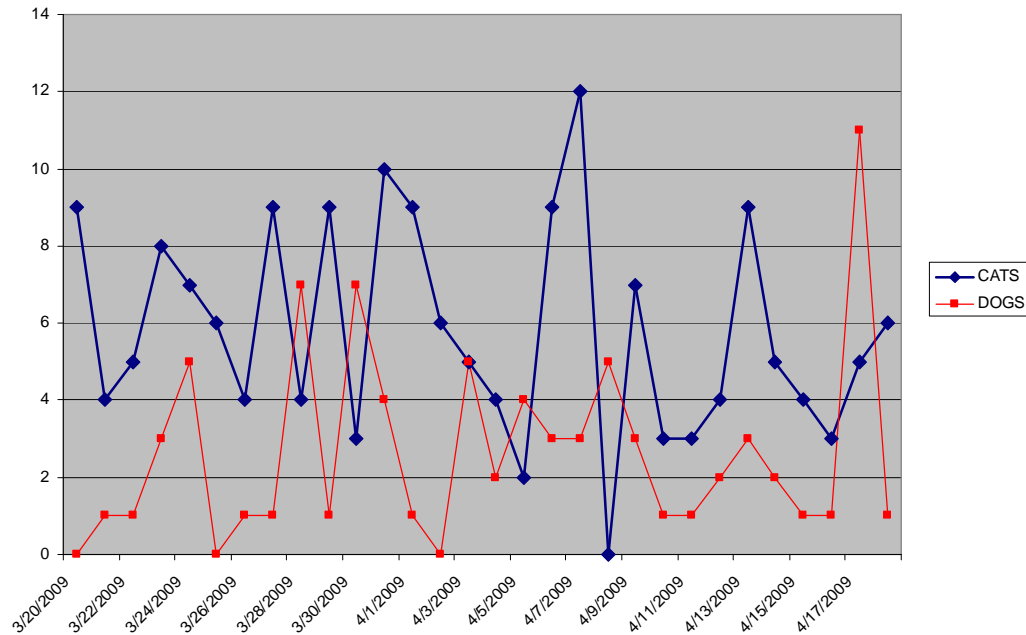


* Includes EDs in the Metro Baltimore region (Baltimore City and Baltimore County) under surveillance in the ESSENCE system.

** **Red Alerts are not indicated on this graph.**

BALTIMORE CITY SYNDROMIC SURVEILLANCE PROJECT: No suspicious patterns in the medic calls, ED Syndromic Surveillance and the animal carcass surveillance. Graphical representation is provided for animal carcass surveillance 311 data.

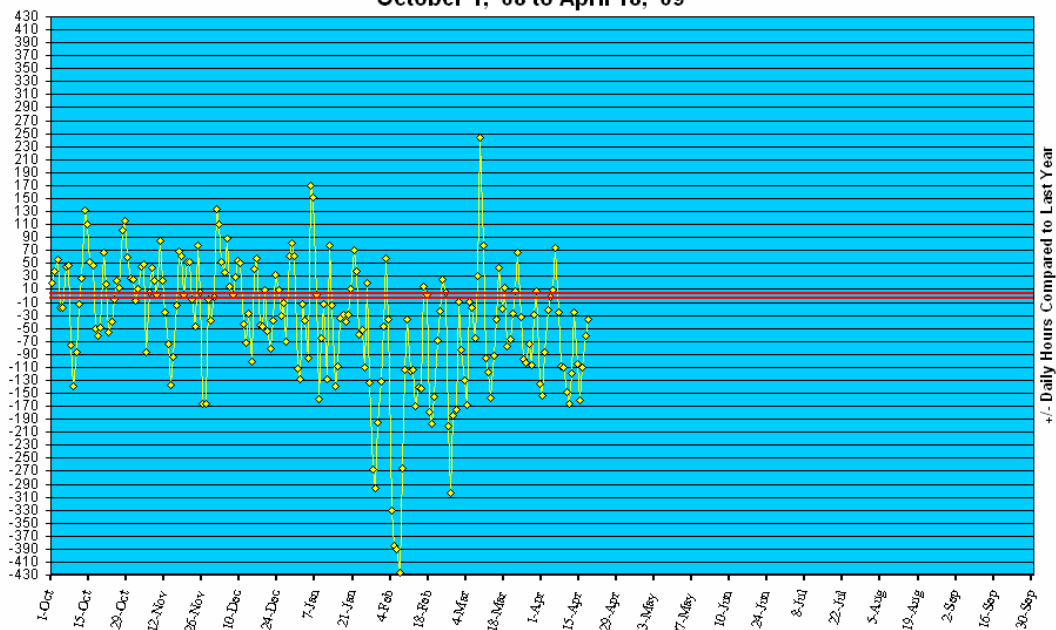
Dead Animal Pick-Up Calls to 311



REVIEW OF EMERGENCY DEPARTMENT UTILIZATION

YELLOW ALERT TIMES (ED DIVERSION): The reporting period begins 10/01/08.

**Statewide Yellow Alert Comparison
Daily Historical Deviations
October 1, '08 to April 18, '09**



REVIEW OF MORTALITY REPORTS

Office of the Chief Medical Examiner: OCME reports no suspicious deaths related to BT for the week.

MARYLAND TOXIDROMIC SURVEILLANCE

Poison Control Surveillance Monthly Update: Investigations of the outliers and alerts observed by the Maryland Poison Center and National Capital Poison Center in March 2009 did not identify any cases of possible terrorism events.

REVIEW OF MARYLAND DISEASE SURVEILLANCE FINDINGS

COMMUNICABLE DISEASE SURVEILLANCE CASE REPORTS (confirmed, probable and suspect):

Meningitis:	<u>Aseptic</u>	<u>Meningococcal</u>
New cases (Apr 12 – Apr 18, 2009):	09	0
Prior week (Apr 5- Apr 11, 2009):	09	0
Week#15, 2008 (Apr 6 - 12, 2008):	12	0

OUTBREAKS: 2 outbreaks were reported to DHMH during MMWR Week 15 (April 12- 18, 2009):

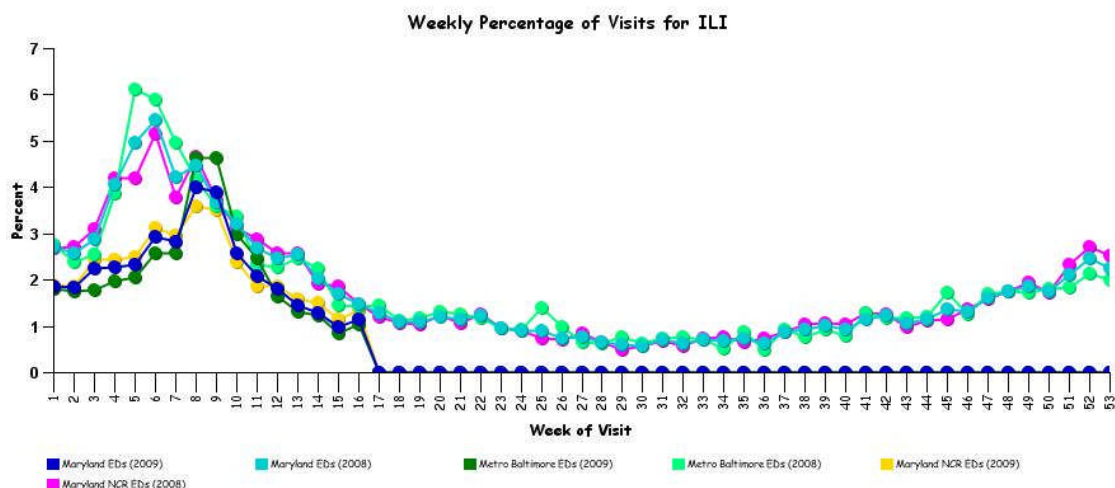
2 Gastroenteritis outbreaks

2 outbreaks of GASTROENTERITIS associated with Assisted Living Facilities

MARYLAND SEASONAL FLU STATUS: Influenza activity in Maryland for Week 15 is SPORADIC. During Week 15, 27 confirmed cases of influenza were reported to DHMH.

SYNDROMIC SURVEILLANCE FOR INFLUENZA-LIKE ILLNESS:

Graph shows the percentage of total weekly Emergency Department patient chief complaints that have one or more ICD9 codes representing provider diagnoses of influenza-like illness. This graph does not represent confirmed influenza.



PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO Pandemic Influenza Phase: Phase 3/4: No or very little human-to-human transmission/Small clusters with limited human-to-human transmission, suggesting that the virus is not well adapted to humans

US Pandemic Influenza Stage: Stage 0/1: New domestic animal outbreak in at-risk country/Suspected human outbreak overseas

*More information regarding WHO Pandemic Influenza Phase and US Pandemic Influenza Stage can be found at: <http://bioterrorism.dhmm.state.md.us/flu.htm>

WHO update: As of April 17, 2009, the WHO-confirmed global total of human cases of H5N1 avian influenza virus infection stands at 418, of which 257 have been fatal. Thus, the case fatality rate for human H5N1 is about 62%.

AVIAN INFLUENZA, HUMAN (Egypt): 18 Apr 2009, A 25-year-old Egyptian woman has contracted the highly pathogenic bird flu virus after coming into contact with infected birds, the latest case in a growing spate of infections in Egypt, state media said 17 Apr 2009. The new infection brings to 65 the number of bird flu cases in humans in the most populous Arab country, which has been hit harder by bird flu than any other country outside Asia. The woman, from El-Marg on Cairo's outskirts, was in critical condition on a ventilator after falling ill with a fever on 11 Apr. She was being treated with the antiviral drug Tamiflu, state news agency MENA reported. Egypt has seen a surge in cases in recent months, with 14 people confirmed to have contracted this virus since the start of the year compared to 7 in the same period last year. Most of the new cases have been young children, a change from 2008. The World Health Organization said this month [April 2009] it was concerned some Egyptians may carry the bird flu virus without showing symptoms, which could give it more of a chance to mutate to a strain that spreads easily among humans. The issue will be the subject of an Egyptian government study backed by WHO.

AVIAN INFLUENZA, HUMAN (Egypt): 17 Apr 2009, The Ministry of Health of Egypt has reported a new confirmed human case of avian influenza. The patient is a 33-year-old female from Kellin district, Kfr El Sheikh Governorate. Her symptoms began on 7 Apr and she was hospitalized at Kfr El Sheikh Fever Hospital on 15 Apr where she was started on oseltamivir the same day. She is in a critical condition. Infection with H5N1 avian influenza was confirmed by the Egyptian Central Public Health Laboratory on 15 Apr. Investigations into the source of her infection indicates a history of close contact with dead and sick poultry prior to becoming ill. Of the 64 cases confirmed to date in Egypt, 23 have been fatal.

AVIAN INFLUENZA (Indonesia): 13 Apr 2009, The bird flu virus has spread within Sungai Apit district in Siak regency, Riau, following the death of a child infected with the virus at the end of March 2009, says a local official, adding prevention measures were being hampered by residents' reluctance to cull their poultry. District chief Indra Atmaja said the spread of the virus was only discovered following reports of poultry dying abruptly on 4 Apr. "After checking by a team of veterinarians, 2 of the chickens tested positive for bird flu. A day earlier, we received reports that 12 chickens owned by other residents had died suddenly," Indra told The Jakarta Post by phone on 8 Apr. He added the virus had spread to Teluk Masjid and Teluk Batil villages and Sungai Apit subdistrict. "Seven chickens died suddenly the previous day in Sungai Apit subdistrict, while in Teluk Masjid and Teluk Batil, the number has reached 29," he said. "Based on field tests conducted by the Siak Animal Husbandry Agency, the chickens tested positive for bird flu." Indra said the test results had been publicized through village chiefs and neighborhood unit chiefs to raise residents' awareness of the risk of infection. The team from the Siak Animal Husbandry Agency has sprayed residents' poultry cages with disinfectant to prevent the virus from spreading further. Indra also urged residents to cull their poultry. However, he said only few residents were willing, while most would only do so if paid to. "It's not that we don't want to, but the district office has no such budget for the purpose. For now, we can only remind the residents, including through sermons at mosques, of the risks of bird flu. We cannot force the residents to cull their poultry if they don't want to," he said.

NATIONAL DISEASE REPORTS:

SALMONELLOSIS, SEROTYPE RISSSEN, SPICES, EXPANDED RECALL (USA): 17 Apr 2009, Union International Food Co. is expanding a spice recall to include all Lian How brand and Uncle Chen brand sauces, oil and oil blends in various size packages because the products may be contaminated with Salmonella. The company had previously recalled Lian How brand and Uncle Chen brand dry spices. California state health department officials say the salmonellosis outbreak has sickened 33 people throughout northern and central California, and 9 others in Nevada, Oregon and Washington. No deaths have been reported. Officials say most of the people sickened appeared to have been exposed while eating at Asian restaurants that used the company's spices. The company said salmonella was isolated from an open container of Lian How white pepper. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

PLAGUE, RABBIT (New Mexico): 15 Apr 2009, The New Mexico Department of Health's Scientific Laboratory confirmed plague in a rabbit from Santa Fe this week. The rabbit was found dead on a private residence about 1/2 mile north of the Santa Fe National Cemetery. This is the 1st indication of plague activity in Santa Fe County this year. The Department has also investigated a case of plague in a dog near Ojo Caliente in Rio Arriba County in February 2009. In

New Mexico, there was one human case of plague in 2008 in an Eddy County man who got the disease from hunting rabbits. (Plague is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

CAMPYLOBACTERIOSIS, UNPASTEURIZED MILK (Colorado): 15 Apr 2009, Colorado state health officials announced on 14 Apr 2009 that a Montrose dairy must meet a series of conditions before it resumes distribution of raw milk, a week after revealing a series of people were sickened by a food-borne illness. The Colorado Department of Public Health and Environment shut down the Kinikin Corner Dairy LLC on 7 Apr 2009 after 12 Western Slope residents were sickened by campylobacteriosis. At least 10 of those people reported drinking raw milk, with 8 of them getting milk from Kinikin. The state informed the dairy operator it must conduct laboratory testing of milk collected at the dairy that shows raw milk is negative for Campylobacter, E. coli and other fecal coliform. Lab tests must also show that raw milk is negative for antibiotics, meets acceptable standards for total coliform and conforms to Kinikin's standards for acceptable levels of somatic cell and standard plate counts. The dairy must also conduct follow-up sampling for the next 2 weeks to show the raw milk is free of contamination. Kinikin cannot resume distribution of milk until it meets all of those conditions. State health officials emphasized that although the dairy may reopen after passing the testing criteria, the department can't certify the milk as safe to drink. "The department cannot ensure the safety of milk that is not pasteurized," said Ned Calonge, the state's chief medical officer. The state is contacting approximately 200 people who are participants in the dairy's cow-share operation. Those participants buy a share of a cow and receive raw milk in return. Consumers with raw milk or raw milk products from Kinikin are advised to throw them out. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

TULAREMIA, RABBITS (New Mexico): 15 Apr 2009, The New Mexico State Department of Health says rabbits in New Mexico are getting sick and dying from the bacterial disease tularemia. The illness is potentially serious in people. Tularemia is caused by a bacteria found in animals, especially rodents and rabbits. Symptoms in people are similar to those of plague: Sudden fever, chills, headaches, diarrhea, muscles aches and joint pain. Other symptoms can include pneumonia, chest pain, ulcers on the skin or mouth, swollen and painful lymph glands, swollen and painful eyes and a sore throat. Public health veterinarian Dr. Paul Ettestad urges people to follow the same precautions against tularemia as for plague. They include not allowing pets to roam and hunt, using flea-control products on pets, and not handling sick or dead rodents or rabbits. (Tularemia is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

INTERNATIONAL DISEASE REPORTS:

CHIKUNGUNYA (Indonesia): 18 Apr 2008, After the attack on the Pusuk village, Kecamatan Kelapa, outbreaks of chikungunya virus again attacked residents of several villages. Around 41 residents in the Village District Pangkalberas developed symptoms such as sudden paralysis, and fell ill with fever due to chikungunya virus infection, during the last 3 days. The survey results that have been done in the last 2 days have found that there are 41 people who have clinically exhibited symptoms indicating that they were infected by chikungunya virus. The estimated number of chikungunya cases has not increased since then. Spraying (fogging) of mosquito breeding sites has been conducted, and health personnel have counseled the residents in the area of the occurrence of chikungunya cases. (Emerging Infectious Disease are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

SCOMBROID POISONING, TUNA (Scotland): 17 Apr 2009, A total of 3 cases of suspected food poisoning have been investigated in the Inverness area after being diagnosed on Wednesday 15 Apr with illness caused by toxins produced in fresh fish like tuna and mackerel that has not been stored at correct temperatures. Symptoms including sweating, headaches, diarrhea and nausea can appear within minutes and last up to 12 hours, but are thought to have no long term consequences. NHS Highland and Highland Council's environmental health team describe it as "scombrotoxin" food poisoning and have established a link to fresh tuna steaks bought from Tesco Extra in Inverness Business and Retail Park. The supermarket has withdrawn the product and anyone who bought it on Monday, Tuesday or Wednesday [13-15 April 2009] is asked to throw it away or return it to the store. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

UNDIAGNOSED ILLNESS, TRAIN PASSENGER (Russia): 17 Apr 2009, The Chinese woman who died on the Blagoveshchensk-Moscow train did not have SARS (severe acute respiratory syndrome - atypical pneumonia) or dangerous types of influenza stated Gennady Onishchenk, Head of the Federal Supervision Agency for Customer Protection and Human Welfare of the Russian Federation (Rospotrebnadzor), on Friday 17 Apr. "Biopsies of lungs, intestines, and brain of the deceased woman have shown no evidence of infection by SARS virus, influenza viruses of the H1, H3 and B flu types, nor the highly pathogenic H5, H7 and H9 strains of influenza virus," stated the Chief Public Health Physician. According to him, tests are still being conducted and data from other laboratories will be received probably at between 11:00 - 13:00 hrs on Friday. The 24-year-old Chinese citizen died suddenly on Wednesday 15 Apr. By the decision of local public health officials, the carriage in which she was traveling was disconnected from the train at the Zuyevka station [Kirov Region] on the same day. The train car was sent for disinfection and the 51 passengers and 2 conductors of the train's 2nd car were taken to the local infectious diseases hospital. The Russian Federation Chief Public Health Physician also said that quarantine measures are being applied to the passengers of the train's 1st and 3rd cars which were also detached from the Blagoveshchensk-Moscow train and sent to a siding as a temporary quarantine measure. Passengers of the 2nd carriage of the train have been hospitalized and are under full medical supervision. (Emerging Infectious Disease are listed in Category C on the CDC list of Critical Biological Agents) *Non-suspect case

VIBRIO PARAHAEMOLYTICUS, FATAL (Singapore): 13 Apr 2009, The mass food poisoning incident involving an Indian rojak stall at the Geylang Serai temporary market has claimed its 2nd victim. A 59-year-old woman who was hospitalized in Alexandra Hospital died on 8 Apr. The hospital said she was admitted with food poisoning on 4 Apr. The incident has also killed another woman, a 57-year-old canteen assistant, and caused a 38-year-old expectant mother to miscarry. So far, 146 people have been affected by the food contamination, 48 of whom were hospitalized. The Health Ministry says it appears that the transmission, caused by a cross-contamination of rojak and raw seafood ingredients harboring the *Vibrio parahaemolyticus* bacteria, has ceased. Laboratory investigation confirmed 12 cases tested positive for *Vibrio parahaemolyticus*, including the 1st death. Meanwhile, the Geylang Serai temporary market, which houses about 300 stalls, was closed for routine cleaning on Wed and Thu 8-9 Apr. The last time spring cleaning took place there was in October 2008. Rojak is a fruit and vegetable salad dish commonly found in Malaysia, Singapore and Indonesia. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents) *Non-suspect case

ANTHRAX, HUMAN, LIVESTOCK, SUSPECTED (Indonesia): 12 Apr 2009, At least 47 villagers in Timor in East Nusa Tenggara [Nusa Tenggara Timur] were hospitalized after consuming meat from a cow carcass believed to be tainted with anthrax. The residents of Tetaf village in West Amanuban district complained of diarrhea, vomiting and high fever. Head of veterinary health at the provincial animal husbandry agency Benyamin Bili confirmed 9 Apr the incident in which dozens of villagers had to be treated after consuming meat from the dead cow. "There are no fatalities in the incident," he said. "Such food poisoning cases after consuming beef often occur in the area." He added 19 people were being treated at the Niki-niki community health center, while the other residents were receiving outpatient treatment. Another food poisoning case occurred at Takari district in Kupang regency, where 28 residents had to be treated after consuming pork. "The residents ate the pork at a mourning house," said provincial health agency head Stefanus Bria Seran. (Anthrax is listed in Category A on the CDC list of Critical Biological Agents) *Non-suspect case

OTHER RESOURCES AND ARTICLES OF INTEREST:

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <http://bioterrorism.dhmm.state.md.us/>

Maryland's Resident Influenza Tracking System: www.tinyurl.com/flu-enroll

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail me. If you have information that is pertinent to this notification process, please send it to me to be included in the routine report.

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